

FORM PTO-875 (REV. 1-86)	U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE	SERIAL NO. <i>916646</i>	FILING DATE <i>10-8-86</i>
<b>PATENT APPLICATION FEE DETERMINATION RECORD</b>		APPLICANT (FIRST NAMED) <i>F. A. L. Esperanza, Jr.</i>	

**CLAIMS AS FILED - PART I**

FOR:	NO. FILED	NO. EXTRA	SMALL ENTITY		OTHER THAN A SMALL ENTITY		
			RATE	FEES	OR	RATE	FEES
BASIC FEE				\$170			
TOTAL CLAIMS	<i>9</i>	-20-	X6-				
INDEP. CLAIMS	<i>9</i>	-3-	X17-				
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT			X55-				
				<b>TOTAL</b>	<b>\$170</b>	<b>OR</b>	
						<b>TOTAL</b>	<b>\$</b>

\* If the difference in col. 1 is less than zero, enter "0" in col. 2

**CLAIMS AS AMENDED - PART II**

AMENDMENT A	(1)		(2)		(3)		SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE	
TOTAL		MINUS	**	-						
INDEP.		MINUS	***	-						
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM										
					<b>TOTAL ADDIT. FEE</b>	<b>\$</b>	<b>OR</b>	<b>TOTAL</b>	<b>\$</b>	

AMENDMENT B	(1)		(2)		(3)		SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE	
TOTAL		MINUS	**	-						
INDEP.		MINUS	***	-						
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM										
					<b>TOTAL ADDIT. FEE</b>	<b>\$</b>	<b>OR</b>	<b>TOTAL</b>	<b>\$</b>	

AMENDMENT C	(1)		(2)		(3)		SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE	
TOTAL		MINUS	**	-						
INDEP.		MINUS	***	-						
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM										
					<b>TOTAL ADDIT. FEE</b>	<b>\$</b>	<b>OR</b>	<b>TOTAL</b>	<b>\$</b>	

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1.